# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tim Kerry Keyes, et al.

Art Unit: 3692

Serial No.: 10/035,968

For:

Examiner: Graham, Clement B.

Filed: December 31, 2001

METHODS AND SYSTEMS

FOR ASSESSING LOAN

**PORTFOLIOS** 

Mail Stop: Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

### TRANSMITTAL

Transmitted herewith is:
 Transmittal (3 pages)
 Request for Reconsideration in response to Office Action mailed December 5, 2007 (18 pages)

### **STATUS**

Applicant claims small entity status. is other than a small entity.

#### **EXTENSION OF TERM** The proceedings herein are for a patent application and the provisions of 37 C.F.R. 3. 1.136 apply. (complete (a) or (b), as applicable) Applicant petitions for an extension of time under 37 C.F.R. 1.136 $\bowtie$ (a) (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:) Other than small Small entity Fee Extension for response entity Fee (if applicable) within: $\boxtimes$ first month \$ 120.00 \$ 60.00 second month \$ 460.00 \$ 230.00 third month \$ 525.00 1,050.00 fourth month 1,640.00 \$ 820.00 fifth month \$ 2,230.00 \$1,115.00 \$120.00 Fee: If an additional extension of time is required, please consider this a petition therefor. (Check and complete the next item, if applicable) An extension of months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$120.00 OR Applicant believes that no extension of term is required. However, this (b) conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension

of time.

## FEE FOR CLAIMS

<u>. 1</u>	(Col. 1)		(Col. 2)	(Col. 3)	small entity		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$25.00 = \$		x \$50.00 = \$
TOTAL INDEP.		MINUS		=	x \$105.00 = \$		x \$210.00 = \$
	FIRST PRESEN	TATION OF	MULTIPLE DEP.	CLAIM	+ \$185.00 = \$		+\$370.00 = \$
<u></u>					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

	(a)	No additional fee for Claims is required
	(b)	OR  Total additional fee for claims required \$
5.		FEE PAYMENT Attached is a check in the sum of \$
	$\boxtimes$	Charge Deposit Account No. 01-2384 the sum of \$120.00. A duplicate of this transmittal is attached.
6.	$\boxtimes$	<b>FEE DEFICIENCY</b> If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.
	$\boxtimes$	AND/OR  If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7.		Other:

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